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APPLICANTS

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** CONTINUING DATA *****

This application is a DIV of 08/788,018 01/24/1997 PAT 5,981,840

DJF

** FOREIGN APPLICATIONS *****

DJF

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 03/13/1998

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: DJF	IA	1	12	5

ADDRESS

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TITLE

METHODS FOR AGROBACTERIUM-MEDIATED TRANSFORMATION

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees
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<p>RECEIVED 1032</p>	<p>No. _____ for following:</p>	<table border="1"> <tr> <td><input type="checkbox"/></td> <td>1.18 Fees (Issue)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Other _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Credit</td> </tr> </table>	<input type="checkbox"/>	1.18 Fees (Issue)	<input type="checkbox"/>	Other _____	<input type="checkbox"/>	Credit
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